

State of Rhode Island and Providence Plantations **Department of State - Business Services Division**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

| 1. Entity ID Number | 2. Exact na | E TO FILE THIS REPORT BY JULY 30 WILL RESULT 2. Exact name of the Corporation | | | , -1 | |
|--|-----------------------------------|--|---|-----------------------------|----------------------|--|
| 27696 | NORTH AI | NORTH AMERICAN UECHI KARATE ASSOCIATION, INC. | | | | |
| 3. State of Incorporation | 4. Brief des | Brief description of the character of business conducted in Rhode Island | | | | |
| RHODE ISLAND | Testing an | Testing and Promoting Students in Uechi-Ryu Karate | | | | |
| 5. Principal Office Address | | 9 | City | State | Zip | |
| 44 East Ave. 2nd Floor | | | Pawtucket | RI | 02860 | |
| 6. List ALL officers (names | and addresses) | | Check 1 | the box to indicate an | attachment 🗍 | |
| President Name Everett E. Crisman | | | Vice-President Name Robert Lapointe | | | |
| Street Address 83 Winter Court | | | Street Address 225 Newman Ave. | | | |
| City Woonsocket | State RI | Zip 02895 | City Rumford | State RI | Zip 02916 | |
| Secretary Name Mary E. Buonanno | | | Treasurer Name Robert Lapointe | | | |
| Street Address 68 Plum Rd. | | | Street Address 225 Newman Ave. | | | |
| City E. Providence | State RI | ^{Zip} 02915 | City Rumford | State RI | ^{Zip} 02916 | |
| 7. List ALL directors (names | and addresses). F | RI Corporations MI | UST list at least THREE dire | | <u> </u> | |
| Director Name Everett E. C | risman | | Director Name Robert La | Check the box to indica | te an attachment | |
| Street Address 83 Winter Court | | | Street Address 225 Newman Ave. | | | |
| Dity Woonsocket | State RI | Zip 02895 | City Rumford | State RI | ^{Zip} 02916 | |
| Director Name Daniel Band | <u> </u> | | Director Name | | 02310 | |
| Street Address 85 Kennedy Circle | | | Street Address | | | |
| | | | | | | |
| City W. Hyannisport | State MA | ^{Zip} 02601 | City | State | Zip | |
| 3. Registered Agent in Rhod | le Island. This inforr | nation is currently of | record in the Department of Sta | ate. Changes require filin | g Form 641. | |
| Inder penalty of perjury, I statements, and that all st | declare and affinatements contain | m that I have exa ed herein are true | mined this report, including and correct. | g any accompanyin | g schedules and | |
| | | | stant Secretary, Treasurer, duly Auth | orized Representative, Rece | eiver or Trustee. | |
| Name of Officer/Authorized Representative | | | | Date | | |
| Robert Lapointe | | | | 5/20/16 | | |
| ignature of Officer/Authorize | ed Representative | " | | L | , | |

MAY 2 3 2016

Form No. 631 Revised: 2016